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APPLICANTS

Jonathan Phillips, Auckland, NEW ZEALAND;

Sathish Puthigae, Auckland, NEW ZEALAND;

JiaLong Yao, Auckland, NEW ZEALAND; Barry Flinn, New Brunswick, CANADA;

Richard S. Forster, Auckland, NEW ZEALAND;

Clare Eagleton, Auckland, NEW ZEALAND;

** CONTINUING DATA ***** CC

This appln claims benefit of 60/428,287 11/22/2002

** FOREIGN APPLICATIONS ***** CC

NONE

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NEW ZEALAND	SHEETS DRAWING 4	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	EXAMINER'S SIGNATURE CC			
Verified and Acknowledged	INITIALS CC			

ADDRESS

22428

FOLEY AND LARDNER LLP

SUITE 500

3000 K STREET NW

WASHINGTON, DC

20007

TITLE

Vascular-preferred promoters

☐ All Fees

FILING FEE RECEIVED 986	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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